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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No. 8543D	
	First Inventor Ji-in Kim Almstead	
	Assignee	The Procter & Gamble Company
	Title	Medicinal Uses of Hydrazones
	Express Mail Label No. EV 249871476 US	

2238B U.S. PTO
 10/661905
 09/12/03

APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents.	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)

2. ☒ Specification Total Pages [48]
(preferred arrangement set forth below)

- Descriptive Title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3. ☐ Drawing(s) (35 USC §113) Total Sheets ☐

4. Oath or Declaration Total pages [6]

a. ☐ Newly executed (original or copy)

b. ☒ Copy from a prior application (37 CFR §1.63(d))
(for continuation/divisional with Box 17 complete)

i. ☐ **DELETION OF INVENTORS**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§1.63(d)(2) and 1,33(b).

5. ☐ Application Data Sheet. See 37 CFR §1.76

6. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

a. ☒ Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i. ☐ CD-ROM or CD-R (2 copies); or

ii. ☒ Paper

c. ☒ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS
<p>8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449/SB08 Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>15. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>16. <input type="checkbox"/> Other:</p>

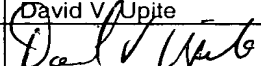
17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR §1.76:

☐ Continuation ☒ Divisional ☐ Continuation-in-part (CIP) of prior application No. 10/134,890 filed 4/29/02/

Prior application information: Examiner: Brian Yong S. Kwon Group/Art Unit: 1614

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

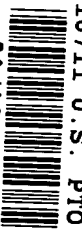
19. CORRESPONDENCE ADDRESS		
<input checked="" type="checkbox"/> Customer Number	(Insert Customer No. here) 27752	

Name (Print/Type) David V Upite	Registration No. (Attorney/Agent) 47,147
Signature 	Date September 12, 2003

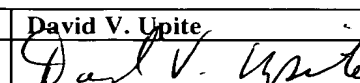
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(Revised for P&G use 7/17/2003)



 FEE TRANSMITTAL for FY 2003 Patent fees are subject to annual revision.	Complete if Known	
	Application Number	
	Confirmation Number	
	Filing Date	September 12, 2003
	First Named Inventor	Ji-In Kim Almstead
	Examiner Name	
	Group/Art Unit	
TOTAL AMOUNT OF PAYMENT (\$) 750.00		Attorney Docket No. 8543D

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																																																																																																																													
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number 16-2480 Deposit Account Name The Procter & Gamble Company <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under status. 37 C.F.R. §§1.16 and 1.17		3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	David V. Upite	Registration No.	47,147
Signature		Telephone	(513) 622-1825
		Date	September 12, 2003

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